Please type a plus sign (+) inside this box →

- 1		1
	+	

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney De	ocket No.	PC11078C			
First Name	d Inventor or Applic	ation Identifier	LYSSIKATOS		
Title	METHYL-3H-IMI 1-METHYL-1H-C	DAZOL-À-YL)-I QUINOLIN-2-OI	LOROPHENYL)-HYDROXY- METHYL)-4-(3-ETHYNYL-PH NE,2,3- SALTS AND METHOD OF		
Express Ma	ail Label No.	EL 87487	1956 US		

	PRODUCTION				
(Only for new nonprovisional applications under 37C.F.R. §1.53(b))	Express Ma	ail Labe	el No.	EL 874871956 US	s. 1
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application con	tents.		ADDRESS TO:	Mail Stop <u>PATENT APPLICATION</u> Commissioner for Patents Box 1450 Alexandria, VA 22313-1450	386 10/801
1. *Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. Specification [Total Pages (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Application - Statement Regarding Fed sponsored R& - Reference in Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed, Detailed Description - Claim(s) - Abstract of the Disclosure	dD	6. 7. 8. 9.	Nucleotide and/c (if applicable, all a. Cc b. Pa c. St ACCOMP Assignme 37 C.F.R. §	e Computer Program (Appendix) or Amino Acid Sequence Submission necessary) omputer Readable Copy aper Copy (identical to computer copy) atement verifying identity of above copie ANYING APPLICATION PARTS ont Papers (cover sheet & document(s)) 3.73(b) Statement re is an assignee)	
3. Drawing(s) (35 U.S.C. 11.3)[Total sheets	entered) PR(S) Cation, 3(b). Prischecked) Which a Extra 4b, is Extra panying	10. 11. 12. 13. 14. 15.	Information Statement Preliminar Return Re (Should be *Small Ent Statement (PTO/SB/6) Certified C	t(s) Status still proper and desire	lication,
	te box, and sup Continuation	FEES, I IF ONE oply the	A SMALL ENTITY STA FILED IN A PRIOR AI requisite information	f prior application No: 10/ 441,567	
				Group/Art Unit:	
18.	CORRESP	ONDE	NCE ADDRES	SS	
Customer Number or Bar Code Label (Insert Custome 23913	er No. or Attac	h bar co		or Correspondence address below	

Name	Paul H. Gins	burg							
Address	Pfizer Inc	Pfizer Inc							
Address	235 East 42	nd Street, 20th Flo	or						
City	New York		State	New York	Zip Code	10017-5755			
Country	United State	s Of America	Telephone	(212)573-2369	Fax	(212)573-1939			
NA	ME (Print/type)	ZAIRA E. JUAR	EZ	Registration No. (Attorn	ney/Agent)	54,205			
Sig	nature	2 rine	nánec	Dat	e 3/5/04				

PTO/SB/17(01/03)

Approved for use through 04/30/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number.

				Complete if Known										
FEE TRANSMITTAL					Applic	ation Nur	mber		Unassigned					
for FY 2003					Filing	Filing Date			Herewith					
101112000					First N	First Named Inventor			Joseph P. Lyssikatos					
Effective 01/01/2003. Patent fees are subject to annual revision.					Exami	iner Nam	ie		Unassigned					
Appli	cant o	claims s	small st	tatus. See 3	37 CFR 1	.27	Art Un	ıit			Unassigned			
Total Am	ount	of Pay	ment	(\$)770	0.00		Attorne	ey Docke	et No.		PC11078C			
	ME	THOD	OF PAY	MENT (check	k all that ap	oply)				FEE CA	ALCULATION (continued)			
			Card [Money Or	rder 🔲 (Other 🗌 None	· · · · ·	ITIONAL F						
□ Depos	it Acc	count:				_		Entity	Small					:
Deposit Account Number	16-1	1445					Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	F	ee Paid	1
														_
Deposit Account	Pfiz	er Inc					1051	130	2051	65	Surcharge – late fee or oath]
Name	L													
The Comm	issior	ner is au	uthorize	ed to: (check a	all that app	ly)	1052	50	2052	25	Surcharge-late provisional filing cover sheet	g fee or]
= "	•	•	ted belov	_	•	overpayments	1053	130	1053	130	Non-English specification	4!]
				• •	•	this application	1812	2,520 920*	1812 1804	2,520 920*	For filing a request for reexamin			ן ן
		i) indicat posit acc		w, except for	the filing i	fee to the above-					Requesting publication of SIR posts aminer action		<u> </u>	ا ل
							1805	1,840*	1805	1,840	Requesting publication of SIR as Examiner action	ıfter]
	_		FEE C	CALCULATIC	אכ		1251	110	2251	55	Extension for reply within first m	nonth		ן ן
1. BASIC F	ILING	FEE					1252	420	2252	210	Extension for reply within secon	nd month		j
Large Enti	itv	Small	l Entity				1253	950	2253	475	Extension for reply within third n	month]
Fee Fe	ee	<u>Fee</u> Code	<u>Fee</u> (\$)	Fee Descri	iption	Fee Paid	1254	1,480	2254	740	Extension for reply within fourth	month]
•	70	2001	385	Utility filing t	fee	770.00	1255	2,010	2255	1005	Extension for reply within fifth m	nonth]
1002 34	40	2002	170	Design filing	g fee		1401	330	2401	165	Notice of Appeal]
1003 5	30	2003	265	Plant filing f	fee		1402	330	2402	165	Filing a brief in support of an ap	peal]
1004 7	70	2004	385	Reissue filin	ng fee		1403	290	2403	145	Request for oral hearing	•]
1005 16	60	2005	80	Provisional	filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding]
	1.5			SUBTOTA	L (1) (\$)7	70.00	1452	110	2452	55	Petition to revive - unavoidable	l]
2. EXTRA C	CLAIM	FEES (FOR UT	ILITY AND R	REISSUE		1453	1,330	2453	665	Petition to revive - unintentional	ı		וֹ וֹ
				Extra Claims	Fee from below	Fee Paid	1501	1,330	2501	665	Utility issue fee (or reissue)			1
Total Claims		7 -:	20**=	0 X			1502	400	2502	240	Design issue fee			7
Independent		3 -	3**= [0 ×	0.00	= 0.00	1503	640	2503	320	Plant issue fee			֓֞֝֟֝֟֝֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֡֓֓֓֡֓֡֓֡֓֡
Claims Multiple Depe	endent		-		0.00	0.00	1460	130	1460	130	Petitions to the Commissioner			ן ן
** or numbe	er prev	iously p	aid, if gr	reater; For Re			1807	50	1807	50	Processing fee under 37 CFR 1.	.17 (a)		ן ן
Large Enti	<u> </u>		Entity	_			1801	770	2801	365	Request for Continued Examinatio	on (RCE)		ال
Fee Fe		Fee Code	Fee (\$)	Fee Descri			1806	180	1806	180	Submission of Information Disclesstatement	osure]
	18	2202	9	Claims in ex	cess of 20		8021	40	8021	40	Recording each patent assignment property (times number of prope]
1201	86	2201	43	Independent	t claims in e	excess of 3	1809	770	2809	385	Filing a submission after final rej (37 CFR 1.129(a))]
	- 1	2203	145			im, if not paid	1810	770	2810	385	For each additional invention to examined (37 CFR 1.129(b))	be]
1204 86 2204 43 **Reissue independent claims over original patent					Other F	ee (specify	y)]		
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent						ess of 20 and	1	ed by Basi		aa Daid				
			SUB.		(\$)	0.00	Neuro	30 Dy Dasi	Crimyr	36 Faiu	SUBTOTAL (3)	\$)	0.00	٦
SUBMITTE	D BY			<u></u>							Complete (if Applicable)		0.00	브
Name (Prin			Zaira	E. Juarez			- 0.				Reg. Number 54,20	05		-
Signature			2.				Date	Mar	rch 15, 200	04			3-109	2

CERTIFICATE OF MAILING EXPRESS MAIL

PRIZER DOCKET NUMBER. PCT1076C
APPLICATION NUMBER: <u>Unassigned</u>
FITLE: CRYSTAL FORMS OF 6-[(4-CHLORO-PHENYL)-HYDROXY-(3-METHYL-3H-IMIDAZOL-4-YL)-METHYL]-4-(3-ETHYNYL-PHENYL)-1-METHYL-1H-QUINOLIN-2-ONE, 2,3-DIHYDROXYBUTANEDIOATE SALTS AND METHOD OF PRODUCTION
APPLICANTS: Joseph P. Lyssikatos, et al.
Express Mail mailing label number <u>EL 874871956 US</u>
Date of Deposit: March 15, 2004
I hereby certify that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" service under 37 C.F.R.1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 By: (Signature of person mailing)
Vilma Pizarro
(Typed or printed name of person)

Pfizer Inc Patent Department, 5th Floor 150 East 42nd Street New York, NY 10017-5612